

PART B - FEE(S) TRANSMITTAL

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APR 24 2006

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25181 7590 02/08/2006


FOLEY HOAG, LLP
PATENT GROUP, WORLD TRADE CENTER WEST
155 SEAPORT BLVD
BOSTON, MA 02110
04/25/2006 WABDELRL 00000016 09530818

01 FC:2501 700.00 OP
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

John Barretto	(Depositor's name)
	(Signature)
April 19, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/530,818	01/09/2002	David R. Elmaleh	MAA-004.02	2433

TITLE OF INVENTION: IMAGING AGENTS FOR EARLY DETECTION AND MONITORING OF CARDIOVASCULAR PLAQUE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	05/08/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
JONES, DAMERON LEVEST	1618	424-009400

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Foley Hoag LLP

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

THE GENERAL HOSPITAL CORPORATION

CHARLESTOWN, MA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 10

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Michael J. DiVerdi
 Typed or printed name Michael J. DiVerdi

Date April 19, 2006
 Registration No. 51,620

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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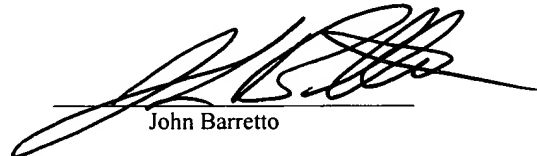
PATENTS
Attorney Docket No. FLA-004.02

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
D. Elmaleh et al.)	
Application No: 09/530,818)	
Filed: January 9, 2002)	Art Unit: 1618
For: IMAGING AGENTS FOR)	Confirmation No.: 2433
EARLY DETECTION AND)	Examiner: D. M. Jones
MONITORING OF)	
CARDIOVASCULAR PLAQUE)	

CERTIFICATE OF MAILING

I hereby certify that the following paper is being deposited with the United States Postal Service as first-class mail in an envelope addressed to Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on April 19, 2006.


John Barretto

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

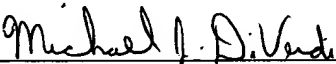
ISSUE-FEE TRANSMITTAL

In response to the February 8, 2006, Notice of Allowance of the above-identified patent application, we enclose Form PTOL-85. Enclosed is a check in the amount of \$730.00 to cover the issue fee of \$700.00 and \$30.00 fee for ten soft copies.

Although we believe that we have appropriately provided for any fees due in connection with this submission, the Commissioner is hereby authorized to charge any deficiencies or credit any overpayment to our **Deposit Account No. 06-1448**,
Reference FLA-004.02.

Respectfully submitted,

Date: April 19, 2006
Customer No: 25181
Patent Group
Foley Hoag, LLP
155 Seaport Blvd.
Boston, MA 02210-2600



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